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On Uterine Hemorrhage. By ARIEL HUNTON, M. D.

Recently, there has been much written, and published in our Medical Periodicals, on Uterine Hemorrhage, which I have ever considered more alarming than dangerous.

The remedies recommended, and mostly in use, are astringents, opiates, and cold affusions, or ice to the abdomen. These cases are frequently attended with syncope, which will alarm the friends, and perplex the physician, and be protracted in spite of the most judicious treatment. I have never known the death of a female from uterine hemorrhage, unless in a state of gestation.

My method for several years, has been somewhat different from the treatment now usually practiced; I use no cold applications to the bowels. Considering that there is an irritation in the genital organs, and that counter irritation will mitigate the internal disturbance in a measure, I apply strong sinapisms, or wet a cloth in alcohol, and sprinkle on it ginger and capsicum abundantly, and apply it to the abdomen in quantities sufficient to cause the patient to complain of the irritation. Among the astringents my reliance is usually gum kino. Lead is a direct sedative, and a poison; I always use it with distrust. If used I combine it with stimulants; Dover's powder, with gum camph. and an additional quantity of opium and capsicum.

I intend to confine my remarks to hemorrhages in an unimpregnated state, which occur mostly with ladies advanced in life; occasionally in the young, but they are rare, for I have had only one, in a practice of thirty-eight years, and cannot say but I was deceived in that case.

I have selected several cases in my practice occurring in the space of nearly thirty years. October, 1825, called to Mrs. M., aged about 44, who was afflicted to an alarming extent, with what is termed here, among the ladies, *flooding*. There had been a suppression of the menses for two

or three months, some disturbance of the stomach, breasts some enlarged; she had thought herself in a state of gestation. In this case, I used cold affusion to the abdomen, astringents were applied with an unsparing hand, and bark was taken in substance when it could be borne.

I could arrest the flooding by those means readily, but in a few days it would return with great violence, and followed her occasionally for more than a year; frequently when I was called to her, the messenger would inform me she was dying, or would die before I could arrive at her residence. In this case, as in nearly all others, there was an accelerated pulse, with increase of heat, more particularly in the region of the uterus, which portends an irritation, or increased action of the genital organs. Mrs. M., after a lingering illness, regained her health, which she is now in the enjoyment of, at the age of near eighty years. She is a *pauper*, and such are said to enjoy high longevity.

CASE II.—January 20th, 1837. Called to Mrs. W., who had been flooding profusely for several hours; had fainted a number of times; pulse small and quick; extremities cold, pale, wan, and exsanguinous; ordered the head to lie low, the foot of the bed to be raised six inches, pressure of a hand on the pubic region, a cloth wet with alcohol, and sprinkled with ginger and capsicum applied to the bowels; pulv. doveri, with opium, camphor and capsicum, and lead added, with solution of kino frequently exhibited until the flooding ceased, which was in a few hours, and did not return. She was a long time an invalid, in consequence of having the charge of a young family and no help.

CASE III.—December 3d, 1840. Called to Mrs. P., of Wolcott, as consulting Physician, with my friend and pupil, Dr. Edwards, (a young man of much promise, but who died the next spring of the epidemic that visited us, usually called *Erysipelas*, which was as fatal, and did its work as speedily as the plague.) In this case I used the tampon, with counter-irritants to the bowels; she had previously taken astringents in liberal quantities: the foot of the bed was raised; the flooding was speedily arrested, and did not return. To see her, I rode some 14 miles in a cold blustering winter night, and all the compensation I ever received, was *leg bail* of the husband to the far west.

CASE IV.—January, 1842. Called to Mrs. W., of Johnson, under 20, married less than a year, and not pregnant, unless I was deceived; she was taken with a profuse hemorrhage, while standing at a table from

home. As she expressed it, the blood *splashed* on the floor. Such a case is so uncommon in the young, I suggested to the mother that it resembled an abortion, the mother and daughter both averred that it was not the case.

In this case I also used the tampon, with stimulants to the bowels, Dover's powders, and astringents, with the foot of the bed raised; if a perspiration is induced, spontaneous hemorrhage will usually cease; it ceased in this case soon after using the tampon, and did not return; the lady was very much exhausted, and it was a long time ere she obtained pristine vigor.

CASE V.—Sept. 1852. Called to Mrs. P., of Troy, Vt., who had lain on her back most of the summer, with her hips elevated, flooding profusely once a month, and more or less usually when moved from the bed to the lounge, or water closet.

The treatment had been for a long time, cold water to the bowels, and gum kino, and but little else, at each return of hemorrhage. My orders were, *no more cold water*, but counter irritants to the bowels. The circulation being low and feeble, I concluded she would take bark, which she bore well, with the myrrh mixture, which she was to take with some nervine; Clematis, or Ext. Valerian. The third day from my visit, the menstrual period arrived, she had a slight show, and none since, up to March, when I last saw her; the appetite was good, and digestion excellent. In those cases where bark is inadmissible, *Prunus Virginica*, or Cherry bark, is my favorite substitute, steeped in cold water. After taking this, or the preparation of Iron, a few days, they will bear more stimulating tonics; the *Sorbus Americana*, or *Populus tremuloides*. The bark of either is an useful tonic, the latter more especially in nervous, and hysterical cases, which are usual attendants in uterine diseases.

Hydepark, Vt., May, 1853.

Case of Encephaloid Tumor of the Uterus, in which healthy Menstruation was performed.

BY THE EDITOR.

In tracing the symptoms, as they present themselves in the course of incurable diseases, and watching the gradual decay of the vital powers, as they yield to the destroyer's grasp, it is not an unwelcome announcement to the anxious physician, that his patient has ceased to live;—and when death occurs, it affords him no little satisfaction to find

upon examination that his diagnosis was correct, and his treatment founded upon true views of pathological science. And, however unsatisfactory it may be to conclude after all, that no new light has dawned upon the subject through his investigations; it is nevertheless useful to communicate freely, one with another, indulging the hope that the time may yet come when the developements of science, will reveal new facts in pathology, and treatment. The subject of remark, in the present instance, was an unmarried lady, aged about 41 years. She had enjoyed ordinary health till within about two years of her death, when she requested my professional care. I found her with active hemorrhage from the uterus, and treated her for menorrhagia; but she soon began to show signs of serious organic disease, and my fears were excited that she was an unfortunate victim of Carcinoma. Upon examination over the pubis, I discovered, in about eight months probably, from the commencement of the attack, a hardness, which could be readily compressed under the hand; and that pressure was always accompanied by hemorrhage. The contractility of the uterine walls did not seem to be impaired, for the tumor constantly reminded me of the condition of the uterus immediately after labor, when loaded with coagula. As the general health was evidently failing, and the patient suffered much from lumbar pains, and weight, I gave her iron, ergot, and extract of hyoscyamus, in the form of pill, with nourishing diet, and occasional stimulants. My object in the above combination, was to allay nervous excitability and pain, by the extract; to increase the red corpuscles of the blood by the iron; and by the ergot to promote, and maintain the uterine contractions, with the hope of arresting hemorrhage, and if possible of expelling any morbid growth that might have attached itself to the inner surface of the womb. She seemed to improve under this treatment, and I ventured to indulge the hope, (though I did not dare to express it,) that the tone of the organ might be restored, and the offending cause of distension, and bleeding, removed. Not being convinced at this time of the true nature of the disease, my hopes were encouraged by the fact that she improved in strength, so far as to go out from home, and visit among her friends without much increase of the discharge, and at every monthly period, the catamenial flow came, as in a healthy condition of the system, though it continued longer than was usual. From this fact, I inferred that the whole of the uterus could not be occupied with the disease, but that a portion of its surface must be competent to secrete a healthy menstrual fluid. And this probably, as much as anything else, encouraged a hope that the affection was not cancerous, as I had not previously known

in my own experience, or that of others, regular menstruation to occur with cancers of the womb.

My patient, however, soon began to show evidences of a mortal disease; and satisfied of its character, I so informed her family. Effusions commenced in the lower extremities; the face, and other parts of the body assumed a bloodless hue, and a general œdema supervened. The tumor increased in size rapidly, the strength failed, and the stomach sympathized closely with the affected organ,—so that nutriment of all kinds was rejected, and during the last week of her life she sank very rapidly.

An autopsy was made by Drs. Gauntt, Butler and myself, in company with three medical students. An incision being made from one superior spinous process to the other, and intersected by a perpendicular cut in the median line of the body, and the integuments laid carefully aside, the abdominal viscera appeared in situ, those of the pelvis being much disarranged. The bladder was flattened, and thrown upon the pubic arch—the uterus was much enlarged, and occupied almost the entire pelvic cavity; it was hard to the feel, and presented a smooth surface, with several adventitious appendages of solid adipose structure, about the size of a hazel nut, attached to it. The left ovary was drawn up on the anterior surface of the womb, and at the entrance of the right Fallopian tube, the tumor was pointed like an abscess. This point, however, was not soft—but appeared to be of a hard lobular structure.

Upon dividing the walls of the uterus, an encephaloid tumor was found occupying about three-fourths of its cavity, and firmly adherent to the corresponding portions of the uterus. The remaining fourth presented an apparently healthy secreting surface, extending from the fundus, along the right side, to the os, from which, it is supposed, the periodical returns derived their supply. At the time of the autopsy, this cavity contained about an ounce of coagula, which seemed to be on its way to the outlet, at the period of dissolution. During the sickness, I often placed my hand upon the fundus uteri, and pressed out large coagula, which, escaping, would relieve the patient of the sense of distension and pain. The bleeding orifices of the vessels of the tumor, probably emptied their contents into this cavity, and the blood remained there, till coagula were formed, which were expelled by uterine effort. The progress of this case, and its post-mortem appearances were interesting to those who witnessed them, and they are furnished to the readers of the Reporter, with the hope that they may prove of some value to the profession.

BIBLIOGRAPHICAL NOTICES.

Transactions of the Kentucky State Medical Society; held in Louisville, Ky., October, 1852—pp. 333.

Proceedings of the Medical Association of the State of Alabama, at its Sixth Annual Meeting, begun and held in the City of Selma, December 13-15, 1852. With an appendix, and list of members—pp. 168.

[For *Transactions of the N. J. Medical Society, held in Jan. last, see March Number of this Journal, in which they are published in full.*]

Transactions of the Medical Society of the State of New-York, at its Semi-Annual Meeting, held in June, 1852, at the City of New-York, and at its Annual Meeting in the City of Albany, held Feb., 1853. Assembly Document—pp. 352.

Proceedings of the Medical Society of the State of Pennsylvania, at its Annual Sessions, May, 1853.

We feel bound, both by our convictions of duty as a journalist, and by our views of the interest and advantage of the Medical profession, to chronicle to the extent that our limits will allow, the proceedings of the various principal medical organizations in the country. Believing as we do, that the magna charta of our independence as practitioners of medicine, as well as the advancement of medical science, and, as inseparable from that, the well-being of our fellowmen when prostrated on beds of pain and sickness,—is held in proportion as our organizations are more or less general and efficient, we have, uniformly at the sacrifice of no little trouble, and expense, endeavored to keep pace with the numerous, and in some instances voluminous reports which emanate from our national and various State medical organizations. A reference to past numbers of the *Reporter* is evidence of the fact. These reports are often exceedingly valuable, bringing to light elaborate and well-written essays, as well as many minor papers, containing facts and observations on the various departments of medical science, which do no discredit to our country, or age, and ought not to be hoarded up in the archives of the societies for whose special benefit they were written. We would be glad to receive *all* the published reports of proceedings of societies, and propose, hereafter, to notice them in some detail as in the present instance, two or three times a year, as occasion may require, culling from them as our limited space will allow, whatever we think calculated to benefit the general reader, and promote the cause of medical science.

The proceedings of our National medical organization,—a carefully compiled, and we believe, very correct account of which, appeared in the last number of the *Reporter*,—will be commented on from time to time, elsewhere. We now proceed to the consideration of the reports named at the head of this article.

We have not been favored with a copy of the transactions of the Kentucky Medical Society, and must depend on reviews of them which we find in the *Transylvania Medical Journal*, and in the *Nashville Journal of Medicine*.*

That a society in the *second* year of its existence can put forth a volume of transactions of 333 pages, is positive evidence of vitality. There is certainly *mind* in Kentucky, or such a report could not have emanated from its infant society. But the names of Sutton, Gross, Evans and Miller are "good" for any amount of labor. They are men who are never heard to say they have "no time" to undertake a work that duty calls them to perform, else their names had never been heard beyond their immediate neighborhoods.

The address of the President, Dr. W. L. Sutton, related to the duty of medical men to the profession, and to the communities in which they live, and is spoken of as worthy its distinguished author. On the subject of *compensation* for medical services, Dr. S. has the following remark :—

"We should require a suitable compensation for our services, and require it to be paid promptly, both by individuals and corporate bodies. Such has been the liberality (if I may call it so) of our profession, that public bodies and even individuals many times think that they confer an honor on a physician by employing him, without troubling themselves about making any compensation; or at most, fixing, themselves, the compensation after the services have been rendered. Thus I have known the trustees of a town, upon the appearance of small pox in it, direct certain physicians to use all diligence in vaccinating all persons susceptible to the disease. After these physicians had used great diligence, successfully vaccinated the inhabitants, and prevented any case appearing out of the family first affected, I have seen the trustees dock their charges sixty-six per cent., on the plea that many physicians vaccinate gratuitously the families which they usually attend. And what is worse, I have seen the majority of the physicians quietly submit to the treatment. Many similar examples might be adduced. This is all wrong. If a man does not respect himself and his profession, he need not expect others to respect either."

Dr. S. has also some very judicious remarks on the subject of *medical journalism*. We commend the following extract to some in our own State, who profess a vast amount of individual and State pride in the

* Cannot some friend in Kentucky forward us a copy of the Transactions?—[*Ed. N. J. Medical Reporter*.

success of their own medical periodical, and then ask them to look through their files and see how much New Jersey does:—

"Journals must be supported by subscriptions *and by contributions*. The subscription list is small: the contribution list vastly more so. I have looked over the Western Journal of Medicine and Surgery, and find that during the year 1851, *ten gentlemen* in Kentucky, besides the Editor, contributed to its pages! Why is this? Why do not physicians of Kentucky give to the world the results of their observations? Say that an equal number contributed to the Transylvania Journal, and we have *twenty* for the whole State!* I repeat, why is this? The excuse ever ready is, 'the press of professional engagements'—'entirely too busy'—'have not the time!' Gentlemen, it will not do. Make your excuse 'want of disposition,' 'want of ability,' or the want of anything but 'time.' In the name of God, do not slander our country by saying that of 1470 physicians in the State, only twenty have time to contribute something to a journal annually. We all have our 'anomalous cases,' and our 'astonishing cures,' which we love to rehearse in the ears of our kind and credulous friends: why not lay them before those whose judgment is worth something: whose good opinion will confer honor?"

No man can write down an essay upon any subject, without understanding more about that subject when he is done than he did when he began. So, then, if he has taught no other man, he has taught himself. So true is this, that if a man wishes to understand a subject thoroughly, one of the very best things he can do is to write an elaborate treatise on it."

Dr. S., in touching upon the subject of *Quackery*, speaks feelingly of the fact that the profession itself is partly responsible for its spread. We agree with one of our reviewers, who, in commenting on this portion of the address, says, "the *tap root* of quackery has sent itself deep into the very bowels of the profession of medicine, and is sustained by its life-blood"—and with him we believe that we must look to the American Medical Association and to our State societies, to correct the evil, by visiting any approach to quackery in any of their members, by summary expulsion.

A report on *Vital Statistics* was made by Dr. Sutton as chairman of a committee, the result of whose labors was, the passage of a registration law, similar to our own. The following facts from this report are of general interest, and worth mentioning:—"In the whole State there is an average of 31 persons to the square mile: the densest population is found in Jefferson county, being 171 persons, the sparsest in Harlan, where there are only 6 to the square mile."

Dr. Evans, in his report on *Ethics*, takes high and tenable ground. The following quotation, it will be easily seen, contains the gist of the whole:

*The fourth volume of the *New Jersey Medical Reporter* contained *twenty-three* original articles, written by *sixteen* New Jersey physicians, and the fifth volume the same number by *eighteen* N. J. physicians. This is aside from reports by Secretaries of Societies, and articles by the editor. There were at least half the number of original articles by physicians out of the State. This is much better than we had supposed.

S. W. B.

—"Founded, as all sound ethics must be, upon the teachings of the Christian religion, Medical ethics have, for their chief corner-stone, these words of our Saviour,—‘All things whatsoever ye would that men should do to you, do ye even so unto them.’”

In reviewing that portion of the report, in which Dr. E. comments on the interference of others with the practitioner, the editor of the *Nashville Journal* gives a case we cannot forbear quoting,—

"Some years ago we had a most interesting patient, a married lady, at one of our large boarding-houses. She had had pneumonia, and was lingering under the effects of that malady. From some questions our patient put to us, one day, we were assured that the sisters of the *speculatorium* had visited her, and we learned upon enquiry that sure enough they had been there; *all* of them had had their wombs turned inside out; some of them had had theirs knocked into a cocked hat, but a great womb doctor had set them all agoing again the same as ever, and my patient was declared to be *exactly* like all of them, and urged to employ their doctor. Most opportunely during this visit a leader of the sisterhood dropped in. We retired with her to the farther side of the room, and in a manner made soft and winning for the occasion, we reasoned with her with great earnestness and no inconsiderable show of learning, assuring her that she and the sisterhood were alas! but too correct in their surmises concerning our patient. That her womb had not only been turned wrong side out, knocked into a cocked hat, riddled and otherwise damaged, but worse still—we added, in tones of touching candence, and pressing our white kerchief to our eyes, *a la stage*. "You amaze me," said our fair auditor in a sighing whisper, bringing her face so near ours as to disturb the effect of the barber's finishing touch; "do tell?" *She has no womb, madam—all, all gone!* Not a vestige left to tell where once the gorgeous structure held imperial sway! and we rounded off the sentence with something about "tombs" and "capulets." We implored her to keep what we had communicated from the ear of our patient, for, certain we were, she would sink under the announcement, now that

"Wombs were everything, and everything was wombs."

We were not annoyed any more in this case. The womb being gone, there was no use for a womb doctor, his 'occupation' went with it."

The Committee on *Obstetrics* reported, through their chairman, Prof. Miller, a man who has gained a world-wide celebrity by his writings on that department of the practice of medicine. The following extract at the same time, reveals the object of the report, as well as the views of its distinguished author on two very important subjects in obstetric practice:

"The committee on *Obstetrics*, instead of offering to the Society a resume of the additions that have been made to our stock of knowledge in this important branch of medicine, within the last twelve months, beg to submit some reflections upon certain valuable discoveries and improvements of prior date, which, so far as they are informed, have been but partially adopted in this State. They refer especially to *Anæsthesia* in Midwifery, and the use of the *speculum uteri* in the diagnosis and treatment of the numerous, difficult, and diversified diseases of the genital organs of females. The former they regard as a precious balm for the pain and anguish of childbirth; the latter as a sure revealer of the arcana of the organs concerned, and a direct avenue of attack by which their diseases may be dislodged. Without the one, the physician must

stop his ears to the most piercing cries extorted from human suffering; without the other, he is blindfolded, and pursues a course of treatment necessarily empirical, or having, at best, no other than a theoretical basis."

We dismiss this subject at present, with the simple remark—*medio tussissimus ibis*.

We next come to Dr. Gross' report on *Surgery*, which embraces nearly 200 pages of the Transactions. It is a review of Kentucky Surgery; and surely Kentucky has nothing to be ashamed of. Nearly 400 cases of lithotomy alone, in that new State, performed by about twenty surgeons, will both show their ability as surgeons, and the prevalence of the causes of stone in the bladder.*

The following, taken from the *Nashville Journal*, is interesting:—

"Kentucky surgery gave the United States a President, thus achieving what that great State herself was unable to accomplish! President Polk, at the age of 17, was relieved of a urinary calculus by the skill of Dr. McDowell. The future statesman was then an illiterate boy, worn down by disease of many years standing, which totally incapacitated him for study. Fourteen years afterwards, while Mr. Polk was a member of Congress, in a letter to his great benefactor, he gives some account of himself during that period. He says, 'I have been enabled to obtain an education, study the profession of the law, and embark successfully in the practice, have married a wife and permanently settled in Tennessee, and now occupy the station in which the good wishes of my fellow-citizens have placed me. When I reflect, the contrast is great, indeed, between the boy, the meagre boy, with palid cheeks, oppressed and worn down with disease, when first he presented himself to your kind notice, in Danville, nearly 14 years ago, and the man at this day in the full enjoyment of perfect health.' The operation was performed in 1812, when the fame of Kentucky's Ciceronean Clay had made him immortal. Could Destiny, from as glorious a height as genius had ever secured to man, have pointed the attention of the statesman to the sick, palid boy, in the backwoods village, tied hand and foot on the operating table, and whisper in his ear! 'Behold the skill of the divine art—From that baptism of blood a giant will arise whose culminating star shall paint with gorgeous glory the western sky, and with such rich effulgence that even thine, which no earthly light *can* pale, will all unheeded shine, and he attain what thou must not reach, and thou, too, in the field!'—Would even Destiny have been believed?"

Dr. Gross claims, for Dr. McDowell, priority in performing the operation of gastrotomy with removal of diseased ovaria: and of the attempts to rob him of this honor, Dr. G. says:—

"In consequence of the novelty of Dr. McDowell's operations, and of the loose manner in which they have been drawn up for publication, an attempt was made by certain writers, both in this country and in Europe, to deny their authenticity, and to cast discredit upon the author's veracity. Among the various detractors who busied themselves in this way, no one was more loud and clamorous than Dr. James Johnson,†

*Our Kentucky friends have a good opportunity to try the effects of the root of the *Hydrangea Arborescens* (which must abound in that State,) in those cases where the calculi are not too large to pass the Urethra. (See Transactions of the American Medical Association, vol. 5, p. 774—copied from this Journal of October, 1850.

†Eclectic Repertory, vol. 7, p. 242. Philadelphia, 1817.

the editor of the London Medico-Chirurgical Review, a periodical well-known in the United States. In speaking of Dr. McDowell's first case, he remarks: 'Dr. Mac. visited the patient at the end of five days, though she had come to his own residence to have the operation performed!! He found her engaged in making her bed! She soon returned to her native place quite well. *Credat Judæus non ego.*' In advancing to the second case, the reviewer says, 'we cannot bring ourselves to credit the statement.' We have already seen that Mrs. Crawford, the subject of the first operation, performed in 1809, and so sneeringly spoken of by Dr. Johnson, survived until a few years ago; and that the authenticity of the second, concerning which he expresses so much incredulity, is equally well established.

In a subsequent article upon this subject, published in October, 1826, the same writer indulges in the following language: 'A back settlement of America—Kentucky—has beaten the mother country, nay, Europe itself, with all the boasted surgeons thereof, in the fearful and formidable operation of gastrotomy with extraction of diseased ovaria. In the second volume of this series, page 216, we adverted to the cases of Dr. McDowell, of Kentucky, published by Mr. Lizars, of Edinburgh, and expressed ourselves as sceptical, respecting its authenticity. Dr. Coates however, has now given us much more cause for wonder at the success of Dr. McDowell; for it appears that out of five cases operated on in Kentucky by Dr. M., four recovered after the extraction, and only one died. There were circumstances in the narratives of some of the first three cases that raised misgivings in our minds, for which uncharitableness we ask pardon of God, and of Dr. McDowell of Danville.*' Such language needs no comment; it speaks for itself, for it carries with it its own condemnation of the man who uttered it. When the learned, caustic and ungenerous editor of the London Medico-Chirurgical Review indited it, he was ignorant—perhaps, wilfully ignorant—of the fact, that he was slandering the father of ovariectomy, and speaking sneeringly of a State that has given birth to the first lithotomist, and the first American Statesman of the nineteenth century."

Of Dr. Gross' operation of castration, we have nothing to say further than that when sometime since, we read his article on the subject, we confess we were not fully convinced by his arguments of the sufficiency of his grounds for depriving a human being of testicles, merely for the lack of a penis. However, we will not venture a decided opinion without knowing more of the circumstances of the case. Our friend of the Nashville *Journal* grows quite warm in his condemnation of the operation.

The *Alabama State Medical Association* met at Selma on the 13th of December last, and continued in session three days. The length of time devoted to the business of the society resulted in the presentation of highly useful reports from different committees, and profitable discussions on subjects of general interest to the profession. The number of fellows present seems to have been rather small, but they were no drones, and the result of their labors is a very valuable report of 168 pages, which does credit to the profession of the State. Such organizations of men who meet together, not simply to exchange civilities—to "eat, drink, and be

*Medico-Chirurgical Review, for January, 1825, p. 216.

merry," or even to transact the routine business of an organized society, but to *labor* for the cause of medical science, *must* ere long include all within their bounds whose fraternity is worth having, nor will the public be backward in discriminating between the men of science, and the parasites, who feed upon the refuse morsels that fall beneath their table.

The *Association* has been in existence six years, and embraces upwards of 150 of the best practitioners in the State. A prize offered by the Sumter Co. Society for the best essay, was carried off by one of their own number—Dr. L. H. Anderson, whose paper on "Autumnal fevers" will be noticed in its place. Dr. Lopez, from a Committee on Insane Asylum, reported that in compliance with the recommendation of the Society the Legislature had taken measures to establish such an institution forthwith.

Dr. Bates, of Marion, related a case of Bicephalous monster which occurred in his practice, and which he has carefully preserved. It was primiparous, occurring in a negro girl about 17 years of age. The peculiarities were, two perfectly formed bodies from the pelvis upward, the bodies being joined from the lower portion of the shoulder-blade to the pelvis—pelvis triangular—two ani—two sets of genital organs, female perfect, male rudimentary—one umbilical cord—three legs well formed, the third having two great toes.

Goitre being an increasingly prevalent disease in the State, a Committee was appointed to report on the subject at the next meeting—Dr. W. Taylor, of Taladega, Chairman.

An interesting discussion arose on the use of quinia in Typhoid fever. The following remarks of Dr. Bates would seem to embody the views of a majority of the members, as to the pathology and treatment of the disease :—

"Dr. B. considers it an enteric disease, affecting the bowels, with degeneration of glands; believes it at first a state of nervous depression which acts upon the glands of the abdomen, and this again by reflex action upon the nervous system. Treatment should correspond; gives nothing which will irritate, food nutritious, demulcent drink, and bowels kept open by laxatives of the mildest nature. His favorite prescription is Chlorate Potass. as a mild, cooling refrigerant, which greatly relieves the patient of his thirst and dry tongue.

"Believes mercurials given for their constitutional effects, injurious. Gives it sometimes in its mildest form as Blue Mass, when the liver seems to be a little torpid, or in the form of Hyd. Cum Creta, when diarrhœa supervenes.

"When the system becomes depressed with sub-sultus tendinum, dry and harsh tongue, he uses stimulants, and for this purpose prefers the Carb. Ammoniz, of which he thinks very highly. He, however, endeavors to anticipate this state by giving the Carb. Ammoniz in small doses. With regard to Quinine, he at first gave it experimentally in 2 or 3 grain doses every two or three hours, and found it produced exaltation of the vital forces. Has given it in 10 grain doses every three or four hours

with same effect. Has never seen it do any good unless there was an exacerbation, and has then given it in 10 or 15 grain doses to relieve the exacerbation, but never found it stop the progress of the disease."

By resolution, the Fellows were requested to make notes during the ensuing year, of the symptoms and treatment of the disease, with as many post-mortem examinations as possible, and report at next meeting.

Full Standing Committees were appointed, representing each county, on number, character, &c., of practitioners of medicine,—on Indigenous Botany, and on Epidemics, &c., besides reporters on other subjects.

Drs. W. H. Anderson and George A. Ketchum, reporters on diseases of Mobile during the year 1852, speak of the general exemption that was enjoyed from epidemics of any kind. Speaking of the summer bowel complaints of children, we find the following:—

"One of your reporters is under the impression, that the Tinct. of Nux Vomica added to some of the favorite diarrhoea mixtures was of essential service in a few cases where he made use of it. It seemed to restore the tone of the bowels, probably by giving more tonicity to the muscular coat. We know from post-mortem examinations, that the wasting dysentery of dentition produces a flabby and relaxed state of the muscular coat. The sphincter ani itself becomes relaxed and powerless, and we have thought that the Nux Vomica exerted a wholesome influence in these cases; at any rate for several years past we have used it as an auxiliary and been well pleased with its effect. The use of this article is not put forward as novel or original, but attention is called to it for the purpose of giving it more extended trial, and we think it will be found an important remedy in many cases where astringents alone are ineffectual, and where the milder forms of mercury have failed to relieve."

From Dr. Anderson's interesting report on Surgery we select the following case:—

"*Eiloides*—Removal of the Tumour.—M. C., planter of Kemper county, Miss., came to me for the removal of a painful tumour about the size of an almond, on the middle of the neck, and over-lying the external jugular vein. It bled freely from any slight injury, and he was very uneasy about its becoming malignant. I removed it 5th January, 1852, by two semilunar incisions embracing the tumour. An artery of some size was cut in dissecting it from its attachments, which bled so freely as to require a ligature. The external jugular was laid bare for an inch by the operation. I drew the edges of the wound closely together with several fine points of suture, and the wound healed so kindly as scarcely to leave a trace of the operation. The tumour was soft and friable, and of the kind denominated dermoid by Dr. Warren, and happily called *eiloides* from its resemblance to bark.

"The patient was under the influence of chloroform, but while he was insensible to pain, and unable to move, was entirely conscious of all that was done, and repeated everything that was said during the operation. It would be well if this happy point could always be hit in the production of anæsthesia."

The substance of Dr. Batchelor's article on the *Gelsemium Semper-virens*, will be found in our eclectic department.

Dr. W. Taylor, of Taladega, presents a valuable paper, entitled

"*Changeability of Disease.*" He argues from nature and observation, the constantly changing nature of disease, rendering necessary from time to time different plans of treatment, in diseases which are handed down from generation to generation by the same name, but whose types have undergone a marked change.

Of the prevailing typhoid tendency in disease and the abuse of purgatives and mercury, Dr. Taylor speaks as follows:—

"It must be admitted that there has been of late years, a natural tendency in most of our diseases to assume a typhoid action. How far this condition is dependent on natural causes, such as meteorological changes, cultivation, &c., and how far on injudicious treatment, remains for future experience and observation to decide. That there are many cases of artificial typhoid, brought about by injudicious treatment—chiefly by the excessive use of purgatives—I have no doubt. There is too much indiscriminate purging in the treatment of our fevers. It is true, that many diseases require purgatives, and many others tolerate them without rapid prostration; but as a general thing, they are more abused in domestic practice, and I am sorry to admit, by some practitioners, than any other class of medicines in the whole *Materia Medica*. Periods may occur, in which most diseases bear the use of purgatives with impunity, but this does not argue their indiscriminate use. The dogma of Hamilton and Cooke, had its origin in one of these periods, but it has been persevered in, by their disciples and followers, without regard to the constitutional changes of disease, to a fearful, and mischievous extent. Many of them, regard the liver as the offending organ in almost every malady, and according to their favorite doctrine, commence torturing it with Cooke's pills, calomel, and the various purgatives of mercury, and continue it for an incredible length of time. Some physicians of this school, seem to consider their patients Promethean-livered; and as Jupiter bound Prometheus of old with chains, and sent an eagle to prey on his liver, which grew every night as much as it had lost in the day, so these modern Jupiters in medicine, confine their patient, and send a vulture in the form of mercury to prey on their livers at night. The chief difference in the comparison, arises in the liver of Prometheus being unconsumable, while that of the modern patient is highly vulnerable.

Mortifying, as may be the acknowledgement, I am forced to admit, that I have seen physicians who stood high in the community as practioners, prescribe a dose of mercury almost every night, for weeks in succession, when nothing in their condition required its administration. How then, can we expect otherwise, than that this valuable agent should fall into disrepute with the community, and become at once the *opprobrium medicorum*, when they see daily, its deleterious effects, from such rash empiricism? But let me not be understood, as being in any way, opposed to the judicious use of this valuable medical agent. Nothing is further from my purpose, than to attempt in any degree, to disparage it as a remedy. It is only to its abuse, its too common administration, which has brought it into such odium with the community, as to render it difficult of administration without disguising it, that I object. So much opposed, are many persons to using it, even when their condition require it, that the practitioner is sometimes tempted to resort to the most artful stratagem in order to cause them to take it. That this state of things has been brought about, by its too common, and indiscriminate use, there can be no doubt."

Dr. T. is an advocate of the "abortive" treatment of fevers by quinia

in ten, twenty, thirty and forty grain doses. Our Southern brethren certainly have good opportunities for observation in this matter, and it becomes us to treat their opinions with all due deference. Of the employment of quinia in typhoid fever, Dr. T. says,—

"If I had never seen the happy effects of quinine, in typhoid fever, in other seasons, localities and climates, I should have been disposed to condemn it, as a remedy in this form of fever. But its failure served only to impress me, with the great medical truth, that diseases viewed from different points, present new aspects, and require new modes of treatment. Many a medical knight, has shivered his lance against the shield of his antagonist, when perhaps, an interchange of position, would have convinced each other, that both were right, and both were wrong. And did our talented President practice medicine in New Orleans, and Dr. Fenner in Montgomery, they might perhaps, approximate each other's views on the points, more closely than they do at present."

In conclusion the doctor predicts that "as our country grows older, and becomes more densely populated, the luxuries of life will continue to increase, and the habits of the people become more artificial and complicated." As a consequence diseases will continue to change,—remittent and intermittent fevers giving place to fevers of an irritative character, while these, and other diseases will be modified by constitutional and hereditary diseases which will increase in frequency. Diseases of a tuberculous and scrofulous character will also increase :—

"In future ages, when large cities shall have sprung up, in our now sparsely settled country, with a crowded population, filthy and ill-fed inhabitants, and ill-ventilated residences, the increase of cachectic diseases will be greatly favored; and as these conditions continue to multiply, diseases of a scrofulous character, will be found to abound in almost every form."

We trust that such sanitary regulations will be instituted in all our States, as will prevent an increase of these diseases from the causes mentioned in the above quotation.

For the sake of morality and religion, as well as humanity, we trust the doctor's next prediction may never come true—viz: the spread of the syphilitic taint. To have it become so "interwoven with almost every form of morbid derangement, and thus become a prolific source of chronic disease" would be worse than—Hahneman's psoric theory!

The *aura prophetica* still holds the doctor, and he goes on to predict that the neuroses, will be more common, causing an increase in mental affections. Gout, goitre, and cretinism will also increase. Some of these predictions are certainly very plausible, but we again express the hope that proper sanitary regulations will be adopted, which, properly enforced, will most certainly prevent a great deal of the sickness he anticipates.

The essay on "The unity of disease" we fail to comprehend. Either, we are very dull, or, it is a meaningless jargon of unintelligible words

and phrases, we are bound to believe the latter, in part at least. However, due allowance must be made for a profusion of typographical errors, a fault throughout the whole work, which ought not to have escaped the attention of the committee of publication.

Lastly we come to Dr. L. H. Anderson's prize essay on the "*summer and autumnal fevers of South Alabama*." We are sorry that our limited space will not allow as extended a notice of this valuable paper as its merits deserve. Dr. A. gives a brief review of the leading phenomena of the various forms of Intermittent fever. Of the malignant forms of the disease, always to be dreaded we find some very judicious remarks. These are ordinarily ushered in by what is usually termed a "congestive chill," the congestion affecting the various organs of the body, as, the pulmonary, cerebral, or some of the abdominal. Alluding to a criticism of the term "Congestive chill" the doctor says, "whoever has many 'congestive chills' to treat, will come to think respectfully of them under any designation."

The detail of symptoms, &c., of the various forms of malignant or "congestive" intermittent, are very interesting and useful, but we must pass over them. The treatment must be prompt and decided, as a return is "always dangerous, and a third paroxysm commonly mortal." The remedy is quinia "liberally administered," and the importance of recognizing the disease from the commencement, is self-evident, considering the short time we have to combat it:—

"The intermission in malignant cases, is generally as perfect as in mild attacks, and herein is the great danger among those unaccustomed to the disease. The patient and his friends are lulled into a false security, and are liable to fail of improving the golden opportunity offered, for arresting the attack. Or perhaps the next paroxysm anticipates its usual hour, before a sufficiency of quinine has been taken to put the system under the influence of the remedy."

The following case of masked malignant intermittent, is interesting and instructive:—

"I recollect having been called some years ago to see a lady who had had an abortion in the sixth week, and still had considerable uterine hemorrhage. I found her cold, pulseless, in a clammy sweat, and with a weak whispering voice. Her breath cold, and tongue pale and cool to the touch. The symptoms were all attributed to the loss of blood. It was in the spring of the year, and intermittents were not common at the time, though the autumn before had been quite sickly; so that malarious disease was not thought of. I tamponed the vagina, and arrested the flow of blood, but the patient did not rally: stimulants internally administered were rejected immediately. There was great oppression of the stomach, and a feeling of sinking and of weight about the præcordia, pain in the back, &c. These symptoms were all referred to the hemorrhage, and were treated with sinapisms to the spine, and to the extremities, friction, warm applications, &c. In about thirty hours the patient got a little warmer, and began to

revive, having commenced taking brandy-toddy as soon as the stomach would bear it, and kept upon it until she was pretty well intoxicated. I left her after re-action seemed to have commenced, expecting that she would gradually improve, and went to see other patients. In thinking of the case, however, and of the close resemblance the symptoms had to those of malignant intermittent, I suspected that she might have had a chill previous to the abortion, and that this and the flooding were mere effects of the intermittent. I lost no time in hurrying back to her, and on strict inquiry, learned that she had complained of being quite chilly for an hour or more before the flooding came on, and had had warm applications made to her feet, &c. There yet remained several hours before the time at which the chill should return, supposing it to be a tertian, and I immediately commenced the liberal exhibition of quinine—five grains every twenty minutes till about forty grains had been taken—adding one-fourth grain morphine to the two doses given just before the time for the return. There was a slight hemorrhage, and a little feeling of chilliness about the same hour that she was first taken, but both soon passed off, and the patient had a favorable recovery. It may here be remarked that abortions and miscarriages are more common when intermittents prevail than at other times, and that this accident commonly happens, during or shortly after a paroxysm of the disease. The chill and the pains come together, and if the abortion does not occur in the first paroxysm, it is very liable to do so in the succeeding one."

The mild form of *Remittent*, is emphatically *the* fever of South Alabama. Its symptoms, course and treatment are well described. On the subject of *Critical days* our essayist says in this connexion,—

"The fever thus continues, sometimes rising at the same hour every day, and sometimes later on alternate days, until the sixth day, when if the observations of the writer of this essay are worth anything the fever, (if it is to terminate favorably,) has a decided *spontaneous* tendency to decline, and to leave the patient free from disease on the seventh day. The fever is generally at its height on the fifth day, and in bad cases, this is the day of danger. In malignant tertian intermittents the fifth is the day for the third paroxysm, universally known to be the most hazardous, and when death occurs in the disease, it commonly takes place either on this day or during the next. Commencing practice with an utter disbelief in the doctrine of critical days, the contrary opinion has been forced upon me by actual observation. I am aware that the idea is discarded by the majority of physicians of the present day, but I think that if any practitioner in the south-west will carefully note down the days on which malarious fever makes its appearance, and record accurately its subsequent course, he will find that the doctrine has a foundation in fact, and is worthy of some consideration. It is true that the fever may often be made much lighter, or apparently arrested by the administration of quinine, during the remissions; but it will generally be observed, that the patient does not frankly recover, and that it is not until the seventh day, that he seems actually well, or clear of all symptoms of the disease. This view of the natural course of fever has something more than a speculative interest. It should by no means induce us to withhold remedies, but it will prevent us from medicating it too actively, and, as in rubeola, scarlatina, &c., to hold our treatment in a measure subordinate to the natural duration of the disease."

With regard to the *Pathology of Miasmatic* fever, our author, after briefly stating the various doctrines that have been held, proceeds as follows:—

"With regard to the fevers of our continent, however, observation shows that they are not a unit. In different sections, they are radically different in their remote and exciting causes, and not less so in their essential nature and their phenomena. They require different treatment, and are altogether different in their post-mortem appearances. They may be divided into those of *animal*, and those of *vegetable* origin—the former embracing the contagious, as variola, rubeola, typhus, &c.—the latter, the different forms of miasmatic or "bilious" fevers. The febrile cause of the former seems to operate primarily upon the *nervous system of animal life*—and only secondarily upon that of organic existence—that of the latter, spends its violence upon the *nervous apparatus of organic life*, affecting only secondarily the cerebro-spinal system. That the contagious and infectious members of the zymotic family of diseases, are produced by the operation of an animal poison, it is probable no one will deny; and the disturbance of the nervous and sensorial function; the muscular prostration, the subsultus, the delirium, and the lesions of animal sensibility generally, show us where the shock of the disease principally falls. That the bilious diseases are of vegetable origin, however, pathologists are not so unanimous. But when we see this class of affections prevailing most extensively and virulently, when vegetable decay is most rapid and abundant, we are at once furnished with a common sense reason for believing the undetected poison, which, for want of a better name, we call malaria, has a real existence and is the cause of the fevers that prevail where circumstances are favorable to its production. A brief glance of the fever generated under such circumstances, show that the cause acts primarily and often entirely, upon the organic system of nerves. A man is struck down suddenly and without warning, with an attack of congestive intermittent. After lying for hours in a seemingly moribund condition, he begins to improve, and after the lapse of some thirty hours, is restored to apparent health, having suffered little or no diminution of physical energies. He takes some twenty grains of a vegetable alkaloid, which has the effect of confirming his restoration to health. This precaution is perhaps neglected, and he suffers with a second or third paroxysm of the same character, much more violent, however, at each return. We now see him bedewed with an icy sweat, hear him speak in a low, husky voice, see his eyes sunken and his features pinched, and feel his pulse weak and thready. Yet this man will take an interest in things around him, converse rationally, rise unassisted from his bed to go to stool, may take a turn around the room, and get back unassisted to bed, in spite of his apparent muscular prostration—to expire perhaps in an hour. We are then convinced that little or no lesion of the nerves of animal life exists, but that the cause of his disease has spent its force upon the great centres of the organic system—the system that overlooks secretion, controls, to a great degree the motions of the heart, and the aëration of the blood; and in fact all those involuntary actions, which, together make the sum of organic existence."

And further, he says,—

"The mode in which the symptoms of autumnal fever are most certainly relieved, considerably favors the congestive theory of the disease. The secretions of the liver, the pancreas, the intestinal exhalents, &c., being restored, we seldom have any difficulty with a bilious fever. Mercury, we know, acts specifically on the liver, and its secretory energies being aroused, it elaborates into bile much of the venous blood thrown upon it by the portal veins, and so discharges it from the organism: the evacuations frequently resembling thick clotted blood, or having a tar-like appearance. No doubt the myriad exhalents of the intestinal canal also contribute their quota to the unloading of the veins and capillaries of their textures, but their discharges are not

so apparent. Now in typhoid fever, the case is aggravated by bilious dejections, the bile proving no doubt irritating to the inflamed or ulcerated patches: but in all diseases of a "bilious" nature, whether fever, mild or malignant, cholera morbus or cholera infantum, bilious colic or bilious pneumonia, we find the case immediately to improve, upon obtaining the free cholagogue operation of mercury."

Dr. A.'s views of the pathology of these fevers, may be deduced from the last quotation. He records the following as "on several accounts the most satisfactory necropsy" he has observed. Patient was young and had been generally healthy, was sick but a few days, took little or no medicine, and the body was examined very shortly after death:—

"*Tillah*, black: æt. 30; slave of H. McDaniel, was taken on Wednesday with a chill followed by a fever, and continued unwell for several days; she complained but little, and was not believed by the family to be seriously ill. On Friday she was cupped over the epigastrium, and had a dose of blue mass followed by oil next morning. After this operated, she took 10 or 12 grs. quinine; was thought better on Saturday, but took a chill on Sunday, and died in a few hours without re-action.

Autopsy, $\frac{1}{2}$ of an hour after death. Habit of body spare; little emaciation, features natural, abdomen of natural fullness.

Head—not examined.

Stomach—seems somewhat contracted—contains about a pint of dark green fluid; mucous membrane pale—no traces of inflammation.

Duodenum—mucous membrane injected at lower part.

Jejunum, ileum and colon—the venous trunks deeply engorged, imparting a deep brown colour to all this portion of the bowels; mucous membrane in some parts brightly injected, and in others of a very dark colour, moderately filled with deep yellow fæces of a semi-fluid consistence.

Spleen—not much enlarged, but of a pultaceous consistence, resembling a clot of blood in texture.

Liver—enlarged, not softened—of a deep bronze colour: seems engorged with venous blood; no distinction of the colours on a cut surface: gall bladder moderately filled with deep brown bile.

Internal venous system—engorged everywhere with thick blood."

The remarks on the *treatment* of the various forms of intermittent and remittent fevers are judicious and to the point.

There is an expedient often resorted to for the purpose of "breaking" a chill in the South and South-west, that the generality of practitioners at the north, either are not aware of, or neglect to resort to. Dr. A. speaks of it as follows:—

"Tourniquetting the limbs, has been mentioned by several writers as assisting in keeping off a chill, and I recollect a case in which the application of this principle was strictly exemplified. I was called to see a man and his wife who were both ill with intermittent. He was shaking violently when I got to the house; the lady's chill had gone off, and she had a high fever. Happening to think of the tourniquet practice, I tied up the man's arm and thigh on opposite sides, so as to compress the veins, and very soon he stopped shaking altogether, and said he felt more comfortable. His wife requiring bleeding, and no bandage being at hand, I took the handkerchief off of the man's arm for the purpose. He, at the same time, loosed the one on his thigh, and the

shivering very soon returned as violently as ever. Since that time, I have often used the bandage, and sometimes with great apparent benefit; frequently applying it to all the limbs, near the trunk. The quantity of venous blood thus retained at the surface is very great, and the practice I think, is worthy of more extensive adoption."

For the same purpose the inhalation of ether or chloroform is suggested.

On the employment of opium in remittent fever, the doctor guards against its use in *incipient pytalism* as follows:—

"There is one condition of the system, however, in which opium is positively dangerous. This condition is that of *incipient pytalism*. The long suspended secretions of the liver, the salivary glands, the pancreas, and the innumerable follicles of the intestinal canal are released, and the organs that produce them started into activity by the influence of mercury. The fever has been conquered, but the system though relieved, is panting after its victory over the enemy. If a large dose of opium be now given, for instance to relieve local pain or to produce sleep, it will perhaps effect the purpose intended, but in many cases it will also suspend all the secretions which have just been re-established. They will be thrown back upon the organs producing them and a *remora* will take place in these organs which will overwhelm their capillaries and paralyze their nerves. Renewed fever, is the consequence, and an irritable nervous condition, distressing to the patient and perplexing to the physician, who does not understand the cause. Perhaps he will give another dose of opium to allay the irritable state in which he finds his patient; and may thus, for a time, lull him into a stupor which will partially conceal the symptoms, but by so doing, he will add to their cause. The treatment that will readily suggest itself in such a case, is to re-establish the mercurial influence, and restore the arrested secretions. This is to be done by small doses of calomel or blue mass, counter irritation along the spine, over the liver, stomach, &c., by mustard, dry cupping, &c.—the bowels should be opened if necessary by enemata, or by mild cathartics, and every possible obstacle removed to the operation of the mercury. If *pytalism* can be renewed, the patient will be relieved; if it cannot, his case is a dangerous one. On this point the writer speaks from an experience which he thinks he cannot mistake, and but for the fear of being tedious, would relate several cases amply illustrative of it.

The above remarks relate only to *incipient* salivation—say to the first twenty-four hours after its appearance. When it is well established it is not so easily arrested by opium, and the latter remedy may be used to alleviate the pain attendant on the affection, or for any other purpose for which it may seem to be indicated, care of course being taken not to give over doses of it, or so much as to produce constipation."

Where it is necessary to employ blisters Dr. A. believes that Strangury can uniformly be prevented "by smearing the plaster with oil of turpentine," before applying it.

He highly recommends the employment of *sinapisms* first over the right and then over the left hypochondriac region, from the spine to the epigastrium, thereby belting the body with a rubefacient impression. He says, that in nine cases out of ten he has found it to excite the liver to action, and cause dark and consistent evacuations, in place of watery ones. In obstinate cases blisters are recommended:—

"The writer regards the effect of sinapisms in promoting the secretory action of the liver of so much importance, that if there were any one point in the treatment of ma-

larious fever, which an experience of fourteen years has afforded him, that he would more regret to lose sight of than another, it would probably be this. Mercury is injurious in fever if it does not produce its legitimate action, and whatever adjuvant will promote this action, is scarcely less important than the remedy itself. It is sometimes necessary also to apply the sinapism along the cervical and dorsal vertebræ as well as over the hypochondria, so as to produce a rapid revulsive effect over the roots of the spinal nerves and the ganglia of the sympathetic; and the rubefacient to this part should always be applied where there is much difficulty in exciting the liver to action."

We have been tempted to quote largely from this essay, and from other portions of these excellent Transactions, and would gladly quote more, did not time and space warn us to bring our review to a close. But though we have occupied much space, we feel assured that our readers will find that we have culled much practical and useful information from the Transactions of the two societies above noticed.

The review will be continued in our next, and the Transactions of the New York and Pennsylvania societies noticed.

S. W. B.

A Clinical Phrase Book: In English and German, containing the usual Questions and Answers employed in examining and prescribing for patients; Questions in asking for, and buying medicines, etc., with an English-German and German-English Pronouncing Lexicon, of all the words occurring in the phrases, with the chief technical terms of Medical writers and Apothecaries; Grammatical Appendix, Table of Idioms, &c. Designed to aid Physicians and Surgeons in Hospitals, Almshouse and Private practice; Also, Druggists and Pharmacutists, in Dispensing their Prescriptions. By MONTGOMERY JOHNS, M. D. Philadelphia: Lindsay & Blakiston, 1853.

The object of this book seems to be to facilitate the intercourse of physicians unacquainted with the German language, with their German patients. An alphabet and Lexicon are furnished, and a great variety of questions and answers, adapted to the various diseases of the human system, and their various stages and conditions. The answers give that latitude that is generally accorded to similar replies in our own language, so that a good degree of positive information may be had relative to those subjective symptoms that are necessary to a correct diagnosis. We have no doubt the book is to be a useful one.

A Treatise on General Pathology: By Dr. J. HENLÉ, Professor of Anatomy and Physiology in Heidelberg. Translated from the German, by Henry C. Preston, A. M. M. D. Lindsay & Blakiston, 1853.

In the work before us, Prof. Henlé has collected the physiological

facts, observed by himself, upon diseased bodies, together with the theories and hypotheses pertaining to them, with a view of pointing out their place in what he calls the embryonic history of the science. The author is evidently of a metaphysical turn of mind, and steps boldly forth into the field of hypothesis, with an ardent desire to raze every insecure foundation that may come within the scope of his research, and build upon its ruins a new and substantial edifice, that shall be more enduring than the faulty empiricism, which now hangs about us, like so much flimsy drapery, affording no protection from the mists of a false and dangerous philosophy. The work is none the less valuable to us, on account of this peculiarity—for so long as we stand, without the ambition to pursue new and untried paths, we shall cease to make those discoveries to develop which is the true destiny of the Genius of Medicine—for it is certainly true, that “our Science cannot take a step in advance, which she has not first marked out by an hypothesis.”—The Editor commenced the translation of this book from the German, for his own private instruction, but has been induced to give it to the public, as a faithful transcript of the author’s views—for which he deserves the thanks of the profession. The publishers will accept our acknowledgments for it.

The Action of Medicines in the System; or, “On the mode in which therapeutic agents introduced into the Stomach produce their peculiar effects on the Animal Economy”—being the Prize Essay to which the Medical Society of London, awarded the Fothergillian Gold Medal for MDCCCLII. By FREDERICK WILLIAM HEADLAND, B. A. M. R. C.S., &c., &c. Philadelphia: Lindsay & Blakiston, 1853—pp. 360.

We are indebted to the Publishers, for Headland’s prize essay. The subject of it is one of importance, of difficulty, and of great interest. We have not had an opportunity to read it thoroughly, but the fact of its having gained the prize of a learned society, devoted to the pursuit of science, is a sufficient guaranty of its value. The author considers ten propositions in which are embraced the various actions assumed by remedial agents when taken into the stomach.

“The first four of these concern the general conduct of medicines after their introduction into the stomach, and before their passage into the blood. Some broad rules are laid down by which the course which they take must be determined. The action of some few on the mucous membrane is also defined.

The remaining six propositions treat of the subsequent behaviour of those medicines which pass into the blood and fluids of the body. Of these, the fifth specifies their general course. The sixth states that they may undergo certain changes in the system. And the concluding four treat of the various modes in which these agents may operate in the cure of the disease.”

With this brief extract, we must leave the subject, remarking, that while some of the views presented may be new to many minds, and even unsatisfactory, they are, nevertheless, worthy of thought. Many of them seem to us conclusive, and the work may rank among the foremost in this branch of science.

EDITORIAL.

THE LATE MEETING OF THE AMERICAN MEDICAL ASSOCIATION.

In the last number of our Journal, will be found a detailed account of the proceedings of the late meeting of the American Medical Association, held at New York; and in taking the pen to notice its action in certain matters, we confess ourself not a little disappointed at its results. We shall try to write, however, without prejudice. As year has been added to year in the history of medicine, the truth has become more and more prominent, that charlatanry, in its various forms, has grown to be a monster evil, desecrating the profession with its contact vile, and sweeping over the land, with its threatening arm outstretched, to corrupt the public mind, and woo the credulous, and ignorant, into confident companionship with itself. And as this storm was raging through the great Empire State, her faithful sons, with a true and noble devotion to the interest of medicine, met, and resolved to stay its progress; and this effort extending from North to South, and from East to West, the talent and energy of the great American phalanx of physicians, all over our broad land, has been collected, and exhibited, in the various meetings of the American Medical Association, till, making a wide circuit through this continent, it meets again at the point of its departure, completing a circle in which is comprehended the entire nation. But alas! alas! after all this toil, and expense, and travel, it is evident that these efforts have so far been vain, and that at this very day, empiricism runs its wild course, with less restraint than ever. Now, it is of interest to enquire what was the starting point in the policy of this Association. All will admit, that it was to elevate the standard of morals, and learning, in the profession—and, if we are not mistaken, the first remedy proposed, was to separate the teaching, from the licensing power. The great fact was elicited, as the cause of the difficulty, that as it was to the pecuniary advantage of professors to secure a large attendance of students at their lectures, and then, as it added great-

ly to their reputation to graduate as many as they possibly could, so, if the power of conferring degrees was relinquished by them, it would argue, (should any considerable number of their candidates fail to pass an unprejudiced and critical examination,) that either the teachers had not done their duty, or that the pupils were deficient in ability, or industry, to obtain a diploma.

Now, there can be no doubt, that professors as a body, do their duty in the matter of teaching—and that they teach not only medical students, but by their researches, and experience, are constantly developing new discoveries, for which they deserve the gratitude of all the world of science; but yet, how strange, that men with such opportunities for usefulness, and possessing such means of research, by which they may spread their fame, will cling to the little remnant of glory, that hangs about the College catalogue. It is well known that no decided action has been had upon this subject by the Association; no effort to rest the licensing power with disinterested examiners has been successful; no allegiance has been acknowledged by the schools, (we believe with two honorable exceptions,) to the expression of the will of the whole profession on the subject of lecture terms, &c.; on the other hand, lecture terms are not lengthened, diplomas are cheapened, the standard is lowered; and then, after all, when the great reformatory movement rolls around again to its starting place, the whole question is settled, by issuing the two following recommendations: First, "to require of every graduate or licensee, his signature to the code of Ethics of this Association, and to furnish him with a copy of the same;" and secondly, that "the formal administration of a pledge faithfully to observe, and keep the said code, form part of the public exercises of Medical Commencements." We hope to see good come of these recommendations, but our faith is weak.

As to the question of delegation, it has taken a comfortable go-by, and rests in quiet obscurity, at least for another year. Two able reports last year were referred to a Committee of Censors, who produced an entire metamorphosis at the same session—and this, being laid over by rule till the New York meeting, was there silently buried without so much as the sound of a funeral dirge over its remains. The idea of which the Association was originally the embodiment, seems now to be completely lost. It has turned upon itself, and poisoned its own life—though not without the hope of restoration perhaps—for it appears that just at the last, Dr. Bolton, of Virginia, gave notice that he "would propose amendments to the Constitution submitted to this Association, by the meeting at Rich-

mond last year, and which have been indefinitely postponed, for adoption at the next annual meeting at St. Louis." The evident impotency of the Association, in these matters of reform, is to be lamented. But why is its arm so powerless? The defect must be in individual delinquency. If the members of a body are sound and true, the body itself will be sound and true. But in the whirl of strife between man, and man for money, and for renown, the true is often lost in the false; the high moral bearing that has ever distinguished our profession, and made it honorable, sinks to the level of low competition, and physicians are found as other men, loaded with the clogs of selfishness. Thus burdened in our private relations, we strive with one another. School is arrayed against school; the interest of one, is confessed to be the disadvantage of its rival; no common tie is acknowledged; no common end is sought. This spirit being the direct opposite of that which originally claimed for our profession a high distinction among men, for its disinterested benevolence, unless checked in its development, must, of necessity, reduce the most ennobling of all human employments, to the low standard of a common trade. We fear that such is the tendency of the present condition of the medical profession in this country. We would not, however, inculcate the idea, that there is no redeeming agency at work. There are those, who, in the retired walks of private professional life, are gaining for themselves, and their high calling, the well-deserved meed of public confidence and esteem; there are those Colleges, in which is maintained at comparatively pure curriculum; and those Associations that are based upon sound principles—these are the conservators of professional purity, and just in so far as they are, or may be, enabled to infuse their spirit into the mass, will the title of M. D. be restored to its wonted dignity.

The amendments renewed by Dr. Bolton, contemplate a thorough change in the organization of the Association. The schools, however, have mostly opposed them; they will continue to press their opposition; and if they continue to be successful—upon them will rest the responsibility of having laid waste the fair reputation of an exalted profession, by their puerile strife for vain honors. Should the principle of delegation be established upon the right foundation, the other reform will follow, as a matter of course; teaching and licensing will be separated for obviously wise reasons—wise alike for professors, pupils, and people.

A few questions in conclusion. By separating the teaching and licensing powers, would not the reputation of professors rest upon a surer basis, and be more enduring than ever? Would not schools be represented, in community, by men worthy of confidence and support, whose probity

and skill would reflect credit upon the learned professors under whose teachings they have sat? Are not skillful men, a better security than long catalogues? The herd of empirics, who at the present time infest society, boast that they are graduates of this, and that school, and the names of professors attached to their diplomas, are blazoned forth as their patrons and friends. To those who know, this passes for nothing; but in the eyes of the ignorant, it is received as the highest authority, and these schools are reckoned as abettors of quackery; with what degree of justice we will not say.

We have now in our mind, one of this class of babblers, who has suspended in his house, open to the view of his patients, two diplomas, hanging side by side; one from what is called a regular school, and the other from a homeopathic college, in which latter no doubt, the moral sense of the graduate has been so far sublimated, and triturated, and passed through the various dilutions, as to become a mere infinitesimal speck, scarcely to be perceived by the keenest glance of the most transcendental vision. Now is the reputation of these professorial brethren, safer, in the hands of such a man, or is the advertisement of their schools as valid and reputable, under such circumstances, as it would be, with the diploma hidden in its case, but with the *man* honest, and true to the profession, and to himself? We are led to make these observations, because we believe that no pledge has the power to restrain such individuals; no revocation of a diploma will cut them off, unless the law of the land forbids their practice; and this cannot be hoped for. The only security is, in a well-grounded medical education, established upon a substantial moral character. And where is the man, unless he is an unrestrained enthusiast, a fanatic, or a lunatic, who has ever been ground into the profession, and had its principles infused through himself, that has left its platform, and followed after the airy phantoms, with which the present age is rife? We shall probably allude to these matters again, but throw out the above suggestions now, to elicit thought and enquiry.

PROCEEDINGS OF SOCIETIES.

In the Bibliographical department of the present number, we have devoted more space than usual, to the Transactions of Medical Societies, because much valuable information is to be derived from such sources, and with the hope that the county organizations of New Jersey, may be stimulated thereby to contribute more than they have ever yet done, to the medical news and literature of the times. We have abundant re-

sources as a State, and abundant talent to develop these resources; but we lack the application, and industry to make them available for the promotion of science. Let our state and county societies be more active, —and their reports more full, and with our general system of organization, we can do as well as any State in the Union, both as to the character and number of our contributions.

Will the secretary of each county society, consider himself commissioned by the genius of our profession, to get a great deal of work done, and then report it to us? Let us all try to do better in the future.

PROCEEDINGS OF MEDICAL SOCIETIES.

[The following was crowded out of our last issue by the extended report of the Transactions of the American Medical Association:]

A quarterly meeting of the Burlington County District Medical Society, was held at the house of S. B. Campion, Mount Holly, on Tuesday, April 12, 1853.

The President in the Chair. The minutes of the last meeting were read, amended, and adopted. Members present—Dr. Butler, (President,) Drs. Stratton, Z. Read, Coleman, Budd, Trimble, A. Reid, Parrish, Page, Wright and Gauntt.

On motion, Drs. Wm. Bryan, of Beverly, and J. J. Wright, of Columbus, having been proposed for membership at the last meeting, were balloted for and duly elected members of this Society. Dr. Wright being present paid his initiation fee, signed the Constitution, and took his seat as a member of the society. Dr. Stratton made some pertinent remarks on the propriety of revaccination, in which he sustained the opinion, that for full protection, it was highly necessary and important that it should be practiced whenever a person is likely to be exposed to the contagion of small pox, or varioloid.

Dr. Budd made a very interesting statement in regard to the contagion of puerperal fever. He said he had a short time since met with a case which had arisen as an original disease, where there had been no communication with infected persons. In this case he was obliged frequently to use the catheter—during which time he was called to attend a patient in labor, who was safely delivered in a few hours. In the course of a few days she was seized with the worst symptoms of uterine phlebitis. She died shortly after the attack. A few days after, he attended another patient who was attacked with the same disease in a malignant form. The first and last recovered. He declined attending obstetrical cases for some time through fear of communicating the disease. There were no other cases of a febrile or inflammatory character at the time, in that section of the country. Dr. Stratton related several cases corroborating the doctrine of contagion—which had come under his own care, where the disease had been communicated by both physicians and nurses.

Several of the members took part in the discussion of this interesting subject.

The delegates, appointed to attend the Annual Meeting of the State Medical Society in January last, report that they were not able to attend except Dr. Martin, who exercised his power to fill vacancies by appointing Drs. Z. Read, Butler and Gauntt. The State society made a distribution of \$10 to each District society; for further particulars they referred to the published proceedings in the *New Jersey Medical Reporter*.

Drs. I. P. Coleman and A. E. Budd, were duly elected delegates to represent this Society in the American Medical Association, to be held in New York on the 3d of May next.

The proceedings of the American Medical Association, for the year 1852, was taken of Dr. Stratton at the subscription price.

On motion, adjourned to meet at R. C. Humphrey's, on the second Tuesday in July, 1853.

FRANKLIN GAUNTT, *Secretary*.

EDITOR'S TABLE.

Courtesy demands that we should devote some space monthly, to a brief notice of the various minor medical publications, which come to us through the mail. These consist of Essays, Addresses, &c., which are often exceedingly valuable to the medical man, though our narrow limits will allow of but a very short notice of them, unless in reading them over we happen upon an *original* idea of value—a rare commodity these days in too many of the issues from the press.

An Essay on Southern Typhoid Fever—By Henry A. Ramsey, M. D., of Columbia Co., Ga. This is a pamphlet of thirty-two closely printed pages, and appears to contain much that is valuable and useful. Dr. Ramsey seems to be a close observer, and holds the pen of a ready writer—but we respectfully suggest that he writes too much. Some one has sagely remarked,

"If thou wouldst fain be thought a sage,
Think a volume, write a page,
And from every page of thine,
Publish but a single line."

The *cacoethes scribendi* seems to have possessed the doctor ever since his obstetrical statistics were called in question at Charleston in 1851, and some of his writings have evinced no very amiable mood. Why does he not communicate his thoughts through the able journals in his own vicinity, rather than the Ishmaelitish medium some hundreds of miles away through which most of his productions reach the public? The above named is the most sensible of any that we have seen from Dr. R.'s pen.

Respiration Subservient to Nutrition; a thesis presented to the Medical Faculty of Harvard University, March, 1850, by E. Leigh, M. D., of Townsend, Mass. This is a well written essay, the aim of which is to prove that "the cardinal office of respiration is to supply the blood with oxygen, which, by its powerful agency may perfect the nutrient fluid,

and fit it for assimilation, and which may also, perhaps, act directly upon the living tissues, thus having a most direct and intimate relation to the great central function of organic life, nutrition."

Essay on the Sudden Coma of Typhus and Typhoid fevers, and Typhoid Pneumonia; with illustrative cases. By J. Lewis Smith, M. D., New York.

New Views of Provisional Callus. By Frank H. Hamilton, M. D., Buffalo.

The Philosophy of Medical Science, * * * A Boylston prize essay, 1849, by E. Leigh, M. D., Townsend, Mass.

A Treatise on the Causes, Constitutional Effects, and Treatment of Uterine displacements. By William-Edward Coale, M. D., Boston.

Galvanism; its application as a remedial agent. By C. H. Cleveland, M. D.

The above have been received from their respective authors. We would gladly notice some of them more in detail, but space forbids at present. We perceive that the author of the latter Essay has connected himself with a firm for the manufacture of a "*Galvanic Abdominal Supporter*." On the cover of Dr. Coale's essay, also, we perceive an advertisement by James Miller & Co., for the manufacture of a certain belt recommended in the essay. These facts thus prominently announced, look as if the essays *might* have been written *for the purpose* of recommending the instruments spoken of. If that is the object of the essays, and the authors have an interest in the manufacture of the instruments, of course the fact will tend to detract from their value.

The Virginia Medical and Surgical Journal; Edited by Geo. A. Otis, M. D., and Howell L. Thomas, M. D. "*Amicus Socrates, amicus Plato, sed magis amica veritas*." Monthly, 84 pages, five dollars a year. Collin & Nowlan, and A. Morris, Richmond.

The above is a remarkably neat, and very attractive journal, both in its mechanical execution, and in the quality of its matter. The numbers received, give promise of future efficiency in the cause of medical science. It ought to be well supported. The "*Chronicle of Medical Science*" is made up almost *exclusively* from *foreign* journals. We hope that American observations will receive due attention, for it has been too much the fashion to rely upon European writers to the neglect of our own, who are certainly, we think, better calculated to be unbiassed and independent in their opinions, than any foreign observers.

We are sorry to have to announce the discontinuance of the *East Tennessee Record of Medicine and Surgery*. Under the control of its able conductor, Frank A. Ramsey, M. D., we had hoped for much aid from it in the cause of medical science. But the experience of one year has convinced Dr. R. that "in Tennessee, as elsewhere, there are many practitioners of medicine, but few physicians." He says, "the Record was established for a specific purpose, which has not been attained. In our

zeal for the professional character of the medical men of East Tennessee, we wished to give them a home medium for the publication of their observations, experience and essays; but they have failed to avail themselves of it." Dr. Ramsey will, in future, be connected with the *Southern Journal of the Medical, and Physical Sciences*, published at Nashville. *

MISCELLANY.

It is reported that the distinguished *Dr. Marshall Hall* intends taking up his residence in this country.

The "*American Medical Society of Paris*" would seem by a circular recently received, to have established itself firmly. One object of the Society, and a good one, is, "to establish a library, chiefly of the books of American medical authors, which would be thrown open gratuitously to physicians from all parts of Europe, as well as of France," many of whom are now constantly in the habit of attending the meetings of the Society, and of referring to the works which have already been presented to, or purchased by the Society. Mr. Edward Bossange, 134 Pearl st., New York, will receive and forward any publications intended for the Society.

A new article of *invalid food*, termed *arabica*, has recently been introduced into Boston, which is attracting considerable attention. It is spoken of as "agreeable, and particularly nutritious," relishing when none of the ordinary eatables can be used. Dr. Litchfield, of Boston, is the agent.

M. Costé has been selected, by the French government, as supervisor of an institution for the *artificial* production of fish! This is done by the mixture of the ova of the female with the semen of the male in factories provided for the purpose. In nature, myriads of the female ova never become impregnated by not being brought into contact with the semen of the male. M. Costé's experiments have been eminently successful, and are likely to result in a plentiful supply of fish. This is making the most of the science of Embryology! Dr. Robertson, of Dunkeld, Scotland, has repeated M. Costé's experiments with success.

Recent experiments have demonstrated the fact that by mixing certain coloring matters, in the food of the silkworm, just before spinning their cocoons, silk can be obtained of any desirable color. Indigo thus administered, produced blue cocoons, and the *Bignonia chica* mixed with the mulberry leaves, produced red silk. The experimenter, M. Roulin, is still at work, with the expectation of producing other colors.

Drs. Wood and Bache, authors of the United States Dispensatory, are both in Europe.

We learn, from the *Stethoscope*, that the medical department of Hampden Sidney College, has established a chair of "*Physiology and Medical Jurisprudence*." The latter subject, as well as *Botany*, are too much neglected in our schools. The editor of the *Stethoscope* says,—“It may

be no business of ours, but we are in favor of preliminary education of students of medicine—senior and junior classes of medical sciences, at least ten chairs, prolonged courses of study, and a ‘separation of the teaching from the licensing power.’ Some one great school will spring up with all these characters, and it will meet with magnificent success.” We simply say to our confrère that it is some of his business, and we are glad that he has spoken out. All the medical journals should take up the matter and discuss it.

A compulsory vaccination act goes into operation in England, on the 1st of August next, after which every child is to be vaccinated within three or four months from birth, under heavy penalties. *No fee is to be paid to medical practitioners, under this act*, and yet the Registrar receives a fee of three pence for every child vaccinated! Magnanimous Britain!!

An effort is being made to establish a childrens’ hospital in New York. A good move, which ought to be set on foot in each of our large cities.

A notorious quack in New York, by the name of Watts, was recently sued for damages sustained by taking his “Nervous Cordial.” The patient was subject to Epileptic seizures, and the parents were induced by a newspaper advertisement, in which a cure was guaranteed, to try his remedy. After using fifteen to twenty bottles (at \$1.00 a bottle), and finding she grew worse rather than better, they applied to him to return the money. He offered to administer it himself. The result was confirmed mania. The jury, after a deliberation of two hours returned a verdict for plaintiff of \$1,100. The testimony in the case is interesting, but we have no room for it.

New Jersey Graduates for 1853.—*Univ. of Pa.* David Benson, A. V. Budd, H. C. Clark, P. F. Fulmer, J. Hart, J. S. Martin, E. F. Taylor, H. G. Wagoner—8. *Jeff. Med. College, Phila.* A. N. Batten, F. Herrmann, J. S. Johnson, D. S. Lessey, J. S. Locuson—5. *Pennsylvania Med. College.* T. T. Price, J. Sharp, W. R. S. Sharp—3. *University of New York.* J. R. Conover, P. T. Tunison—2. Total, 18. (We have not seen a list of the graduates of the College of Physicians and Surgeons of New York.) *

BIOGRAPHY.

ISAAC PARRISH M. D., was born at Philadelphia, March 19, 1811. Educated in the Classical Academy, under the government of the Society of Friends, where his father, the late Dr. Jos. Parrish, as well as Drs. James, and Wistar, Physick and Dorsey received their early training, and at the celebrated boarding-school of John Gummere, at Burlington, New Jersey. In 1829 he commenced the study of medicine with his father,

and graduated at the University of Pennsylvania, in 1832, in the twenty-second year of his age. Spent one year as junior physician in Blockley Hospital, where his opportunities for experience being extensive, he manifested great devotion to his profession, and a particular desire for practical knowledge. He was conspicuous for his resolute moral firmness, and was never known to swerve from a principle which had once been settled in his mind as a correct one. Soon after he graduated he was made one of the Assistant Physicians, of an extensive Cholera Hospital, at the head of which the city authorities had placed his father. And in 1834 he was elected one of the Surgeons of Wills' Hospital, which position he held during the rest of his life :

"Dr. P. was the most active of his colleagues in bringing this hospital within the range of medical students as a clinical school. He gave the first regular course of instruction on ophthalmic surgery in that institution in the winter of 1839-40; and in succeeding years he was always followed through the wards by classes of students."

"As a lecturer, he was instructive and impressive; his voice was clear, and his enunciation distinct and emphatic. He was quick in seizing on the striking point of a case, and so great was his fluency and command of language that he never failed of impressing his auditors."

He was a conspicuous member of the College of Physicians of Philadelphia :

"His name appears very often in the printed discussions, and he wrote several very useful papers, besides five luminous "Annual Reports on the Progress of Surgery," all which are printed in the *Transactions* of the College." * * * *

"In the State Society, his accustomed activity was not wanting; he joined cordially in the business, and he wrote the Sanitary Report of the County of Philadelphia, which is published in the *Transactions* of the Society for 1851. He was one of the most conspicuous men in the County Medical Society, and was twice elected its vice-president. In fact, wherever a sense of duty led him, he found much to do, and he always did it with alacrity and vigor."

He felt from the first a sincere and even an affectionate interest in the establishment of the American Medical Association, and he was therefore appointed at the Convention of New York in 1846, one of a committee, whose duty it was to report on the subject of taking from colleges and other interested corporations, the right of conferring degrees and licenses to practice. He wrote a report on that subject for the Convention of Philadelphia in 1847, and it was printed in the *Proceedings* of that year. This document is worthy of being read again and again, by all who are ready to judge hardly of others, without knowing whether they themselves would do better in similar circumstances." * * * *

"At the meeting of the Association at Baltimore, in 1848, he was appointed one of a committee on Public Hygiene; and, at the meeting of Boston of 1849, he read an able paper "On the Sanitary Condition of Philadelphia," wherein he showed in strong colors the growing evils of a large and increasing city, and how they are sadly neglected, till remedies are hopeless, if not impossible. He shows what evils the inordinate cupidity of the landlord brings on the community, by building up alleys and courts with sub-courts, thus shutting out light, air, and therefore health, from the unfortunate

inhabitants of these dreary abodes. He descants largely on the evils of those crowded habitations in generating typhus fevers, cholera, and infantile summer diseases."

Many valuable papers were from time to time published in the Transactions of the College, but one of great merit on the subject of "Congestive fever" that attracted much attention, appeared in the Amer. Jour. of the Med. Soc. for 1845:—

"The author wishes to show that congestion is not the cause of prostration in this fever, that hence this prostration is not to be treated by bleeding. He considers the congestion a mere symptom of feeble innervation, and therefore to be treated by stimulants."

As a member of the Philadelphia Society for alleviating the miseries of Prisons, he was distinguished by his enlarged philanthropy, which exhibited itself in mild but firm resolves, to relieve the unfortunate victims of crime, while under the censure of the law.

In November, 1849, he read a report before the Society on the disproportionate mortality, and the relative length of sentences between the white and colored prisoners. The Society ordered it printed, and directed that copies be sent to the Governor, Judges of the Supreme Court and Courts of Common Pleas:—

"In this highly valued report, he brought to light a mysterious practice of our courts, which ought to be considered by the public with no little solicitude. The negroes, for the same crimes, were almost universally sentenced for a much longer time than the whites, or, as Voltaire calls them, the ash-colored people. He shows too that the whites are pardoned at the rate of 15 per cent. with their *short* sentences, and that the negroes, with their *long* sentences, are pardoned at the rate of only 3 per cent."

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"But Dr. P.'s labors in the cause of the prisoner did not end even here; he seems to have had continually before him the memorable words—"I was in prison, and ye visited me." He read to the College in 1851, a paper "On the Mortality and Insanity in Separate-plan Prisons in England and America." It is found in Vol. I., New Series, page 173, of the *Transactions*. His object is to show that long sentences are dangerous to the health both of body and mind."

* * * * *

"In his various writings, he always appears fully master of his subject, and to have made the best distribution of the different parts so as to render his piece both luminous and attractive; thus showing a full comprehension of his subject without neglecting the minute particulars, always abounding in medical description. Had he lived to practice and to write another twenty-one years, he might have proved one of the most distinguished benefactors of our science among the medical literati; for he not only had talents for communicating knowledge in an easy and pleasing way, but he was too good a man to pass through life without doing his part in the improvement of medicine, and "straining every nerve," as Sydenham said of himself, "that the cure of diseases after his death might be conducted with greater certainty."

On the 31st of July, 1852, after an illness of a few days he died of dysentery, at his residence, in Philadelphia, in the 42d year of his age—leaving behind him the testimony of a well-spent life, and the assurance of a preparation for death.—(*Memoir by Samuel Jackson, M. D.*)

WM. R. GRANT, M. D., was born in Pictou District, Nova Scotia, December 22d, 1811. He studied the elementary branches, in the neighborhood of his home, preparatory to an academical course. From school he was admitted to Pictou Academy, then under the late worthy and able Dr. McCulloch, whose favors and friendship he merited and maintained:

"When he had finished his academical curriculum, he commenced the study of theology under the late Thomas McCulloch, D. D., who was at that time Professor of Divinity to the Presbyterian Church of Nova Scotia. During the first year of his theological studies, he taught school in the vicinity, and boarded at home. He was much beloved and respected by his pupils, and satisfied his employers. While thus engaged, he showed much ingenuity in making different pieces of philosophical apparatus. He made a small, but complete electrical machine of considerable power, which afforded no little amusement and instruction to his acquaintances. Indeed, his taste for some of the mechanic arts continued through life.

About this time he was seized by an attack of chorea sancti viti, which gave him much annoyance. But, by the skill and attention of Dr. James Donnelly, of the Albion Mines, he recovered. He was afterwards visited by an attack of acute rheumatism, that disabled him about two months or more. He was thus brought for a considerable season into an acquaintance with physicians, and hence, it is thought, his attention was first drawn to this department of professional life.

Shortly after his recovery, he removed from the East River, to teach the grammar school at Antigonish, about fifty miles from his former residence. While teaching, he became acquainted with Dr. Alexander Macdonald, a respectable practitioner. After much thought, and consultation with his friends, he entered the office of Dr. Macdonald in the autumn of 1834, and commenced the study of medicine. Although he relinquished his intention of becoming a minister of the gospel, he did not become the less religious. During his residence at Antigonish, he occasionally joined the communion service with his friends at home, and was marked as a young man of sincere and decided piety.

After devoting two years to the study of medicine with Dr. Macdonald, he determined to complete his medical education in the city of Philadelphia. Accordingly, on the 29th of September, 1836, he sailed from Pictou for New York, where he arrived on the 13th of October. On the 17th, he reached Philadelphia, and immediately matriculated as a student of the Jefferson Medical College. Although he applied himself closely to all the branches of medicine, he had a special fondness for anatomy, and was skilful in dissection. He so distinguished himself in practical anatomy, that even during his second course of lectures—session 1837-38—as appears by his diary, he prepared many of the subjects for demonstration for Professor Pattison's lectures, and, although yet an undergraduate, he received the appointment of Demonstrator of Anatomy during the winter of 1838-39, which appointment he held until the summer of 1842, at which time he resigned his position for the purpose of engaging in private instruction." * * * * *

"Amidst the engrossing occupations of Demonstrator of Anatomy, Grant presented himself, at the end of his third course of lectures, for an examination for the Degree of Doctor of Medicine, having prepared a thesis on 'Topical Application.'" * * * * *

"In June, 1842, Dr. Grant undertook to embalm a human body, and, for the purpose intended, that of transportation, was perfectly successful. A gentleman from Canada, aged sixty-four years, died of cancer of the stomach, under the professional care of

Dr. J. T. Sharpless, and his friends desired to take the body home in as natural a condition as possible. The weather, at that period, was very sultry, hot and wet, and the body, at the time of death, very much infiltrated with water, so that all things contributed to rapid decomposition. On the day of his death, the blood-vessels were filled with a saturated solution of bichloride of mercury, and the next day, a saturated solution of the acetate of alumina was injected, which communicated to the whole body a remarkable rose-colored, life-like appearance. It arrived home on the eighth day after death, with scarcely any change, the weather during this period having been exceedingly warm, and no ice having been employed about the body. A report of the process is given by Dr. Sharpless, in the *Medical Examiner*, August 13, 1842, page 513."

In 1843, Dr. G. assumed the responsibilities of Penn. College then trembling apparently on the brink of ruin. During the first session, he delivered six lectures weekly, on Anatomy, and then upon operative Surgery, while he attended assiduously to the duties of the dissecting room. His connection with the College continued till the day of his death. His assiduity, in his official capacity, and his urbanity and paternal kindness to the members of the class, as well as his high Christian excellencies, manifested toward his associates, and to all who came within his sphere of action or influence, are engraven indelibly upon the memory, of those who knew him :—

"Dr. Grant was a member of the 'County Medical Society,' the 'College of Physicians,' the 'American Medical Association,' the 'Academy of Natural Sciences,' and the 'St. Andrew's Society.'"

He died on the 28th of March, 1853, of valvular disease of the heart.
—(*Memoir by Dr. Dr. Atlee.*)

DEATHS.

Died—At Cayuga, N. Y. May 20, *Dr. John Lawrence Milledoler.*

— In Brooklyn, May 24, *Dr. Chas. D. Rossiter.*

— In Albany, May 21, *Dr. David Martin.*

— At New Haven, June 8, *Dr. James M. Thacher*, of Philadelphia, æt 30.

— *John Manners, M. D.*, at his residence in Clinton, Hunterdon County, New Jersey, on Friday, June 24, at 11 o'clock, P. M., after an illness of six weeks of dropsy. He was aged about 66 years.

He was a Jerseyman by birth, and a son-in-law of the celebrated Dr. Cooper, of South Carolina—highly esteemed in his native State, and leaves many warm friends to bear testimony to his worth as a private citizen—a doctor of medicine, a lawyer, a chemist, and a politician.

He was the President of the New Jersey senate during the winter of 1852, over which he presided, with honor to himself and credit to his party, and was much talked of as the next democratic candidate for Governor of the state. He had many devoted friends, who mourn his loss; yet he had no near relatives to follow him to his grave—no parents, no wife, no children, no brothers or sisters, no nephews or nieces, and no first cousins of his own blood—a circumstance of rather rare occurrence.

He was one of the most learned men of his age, the master of two professions and one science; and, in them all, he had not skimmed the surface merely, but dived to their very bottoms. In addition to this, he had mastered three or four languages. Yet he possessed no great reputation among the masses of mankind, owing to the peculiar order of his genius, and a particular force of circumstances; but among the learned he was extensively known; and the quaint expression of Lord Coke, that "when a man of great learning dieth, much learning dieth with him," is peculiarly applicable to him.—*N. Y. Daily Times.*

Fracture of the os Frontis—loss of cerebral matter—Recovery.—Dr. R. T. Foote, of Society Hill, Alabama, reports in the *Southern Medical and Surgical Journal*, a case of fracture of the cranium, with loss of cerebral matter. The subject was a negro woman, and the injury caused by being struck while asleep, with the pole of an axe in the hands of a negro man. Seven pieces of bone, besides spiculæ, were removed, which, when put together, measured at least three inches square. The membranes and brain were considerably injured. The pulse did not, at any time, rise above 85, which, considering the character and extent of the injury, is rather remarkable. The patient recovered without any untoward symptoms.

Liniment of Hydriodate of Ammonia.—The following formula, which was furnished by Mr. George D. Coggeshall, has been extensively used as a quack remedy. It forms a nearly colorless liniment, containing an excess of Ammonia, is slightly stimulating, and exerts the specific effect of the iodine compounds:—

R	Iodine	gr. xv.
	Alcohol	f 3vij.
Dissolve and add—		
	Oil of Rosemary,	
	Oil of Lavender, of each	f 3i.
	Camphor	3ij.
	Water of Ammonia	f 3i.
	Mix.	

Half an ounce of tincture of iodine might be conveniently substituted for the iodine in substance, diminishing the quantity of alcohol to 6½ ounces.—*N. Y. Journal Pharmacy.*

Apologetic.—When we say that the addition of four extra pages to the present number of the *Reporter* has been insufficient to accommodate the original matter prepared for it, we trust no further apology will be needed for the lack of selections from other journals. We have much matter selected, besides translations from French journals, which we hope to avail ourselves of, hereafter. The past two numbers of our journal furnish evidence enough that an enlargement is imperatively called for, and it is our purpose, permanently to enlarge the work again from the commencement of the next volume.



[Faint, illegible cursive text, likely a signature or name.]



Law Drake, M.D.